PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

101566 700

Effective December 8, 2004									10/366, 198			
CLAIMS AS FILED - PART I (Column 1) (Column 2)							-	SMALL ENT		OR	OTHER SMALL	
U.S	. NATIONAL	STAGE FEES	T				1	RATE	FEE		RATE	FEE
BASIC FEE			SMALL EN	T. = \$ 150	LARGE ENT. = \$ 300			BASIC FEE	150	OR	BASIC FEE	
EXAMINATION FEE			Satisfies PCT Article 33(1)- (4) = \$50 / \$ 100			her situations = 100 / \$ 200		EXAM. FEE	100		EXAM. FEE	
SEARCH FEE			U.S. is ISA = ALL other or \$ 200 /	\$ 50 / \$ 100 ountries =		her situations = 250 / \$ 500		SEARCH FEE	50		SEARCH FEE	
FEE FOR EXTRA SPEC. PGS.			min	nus 100 =		/ 50 =		X \$ 125 =			X \$ 250 =	
TOTAL CHARGEABLE CLAIMS			27 "	ninus 20 =	•	7		X \$ 25 =		OR	X \$ 50 =	· .
INDEPENDENT CLAIMS			3	minus 3 =	•			X \$ 100 =	175	OR	X \$ 200 =	
MUI	TIPLE DEPEN	IDENT CLAIM PR	ESENT					+ \$ 180 =		OR	+ \$ 360 =	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	475	OR	TOTAL	·
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL ENTITY			OTHER THAN		
AMENDMENT A		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO	EST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 37	Minus	1.2	7	=		X \$ 25 =		OR	x \$ 50 =	
	Independent	. 5	Minus		2	= /		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
<u> </u>								TOTAL ADDIT.	. /	OR	TOTAL ADDIT.	
18		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	EST BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MEN	Total	•	Minus	••		=		X \$ 25 =		OR	x \$ 50 =	
AMENDMENT	Independent		Minus	•••		=		X \$ 100 =		OR	X \$ 200 =	
7	FIRST PRES	ENTATION OF M	ULTIPLE DEP	TIPLE DEPENDENT CLAIM				+ \$ 180 =		OR	+ \$ 360 =	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT.	
	If the entry in colu If the "Highest No	rmn 1 is less than the rnber Previously Pai	entry in column d For th THIS S	2, write "0" in PACE is less	column than '20	3. 1, enter "20".			•			
	M the "History No	mber Previously Pain mber Previously Paid	A FOCIN THIS S	PACE is less	than "J".	enter 3.	in th	e appropriate box	in column 1.			